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APPLICANTS
David M. Allen, Howell, MI;

** CONTINUING DATA *****
None sm

** FOREIGN APPLICATIONS *****
None sm

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
** 01/30/2004

** SMALL ENTITY **

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MI	SHEETS DRAWING 4	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 3
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Verified and Acknowledged
Examiner's Signature *[Signature]* Initials

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TITLE
Protective ground mat

FILING FEE RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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